## JULY 1, 2015 - JUNE 30, 2017 CONDOMINIUM ASSOCIATION BIENNIAL REGISTRATION APPLICATION

## ALL INFORMATION PROVIDED IS PUBLIC INFORMATION

## FOR OFFICE USE ONLY

	ENNIAL REGISTRATION DEAD	DLINE: Monday, June 1, 2015 deadline: Thursday, April 30, 2015)	593 017476375 906 01747638	3-12/29/15 3-12/29/15	<sup>∐</sup> 110.00 77.00		
1.	Project registration number: 2618		78	1 1 1			
	Name of condominium project: KANC	DE PALMS	픙	B B			
	Project street address (required):	2058 KANOE ST KIHE! HI 96753					
	Total # units: 7	Expiration of bond on file with Commission:	: 5/13/2015	- ud.,			
	applied for a fidelity bond exemption	the "Expiration of bond on file with Commission (all fidelity bond exemptions expire at the conclorn allows the AOUO to select a fidelity bond ex	lusion of the biennia	nas previously al registration			
2.	a. List the names of the officers of the association (all information provided is public information)						
	President (required): MIKe	. Thatcher		•			
	Vice President (optional):		·				
	Secretary (required): DIW						
	Treasurer (required): Trace	of Mills					
	b. Designated officer (from section Title: <u>Dre3</u> Name	Mill III					
Mailing address (public): 3058 Ka NOE Stypet #3C							
	city: Kihel	State:		260 3430	)		
	Public Email (optional):						
	authorized agents may be able to o	public phone number and public mailing addrebtain the documents, records, and information oursuant to HRS §§ 514B-152 -154.5.	ess where a unit ow required to be provi	ner and the owner's ided to a unit owner	<b>;</b>		
3.	a. Person to receive AOUO correspondence & calls from Commission (required): This Individual will receive notices to update fidelity bond coverage, as well as correspondence from the Commission.						
	Title: Manager Name: Pamela M. Bello / Bello Realty Inc						
	Mailing Address: 95 E. LIDOQ St. #201						
	city: <u>Kihei</u>	State: <u>AT</u> Zip: <u>96753</u> Da	y Phone: <u>808 \$</u>	79 3328 X	7634		
	Public Email (optional): Pa M	10 bello realty.com	<u> </u>				

	D.	authorized to serve civil process, in compliance with Hawaii Revised Statutes Chapter 634.						
		Name Primary: Pamela M. Bello Title Manager Telephone: 808 879 3328)						
		Name Alternate: MIKE Thatcher Title president Telephone: 559 260 3430						
4.	Mai	nagement status (required): (check ONE only and fill in corresponding info)						
		Self-managed by Association of Unit Owners (see Instructions)  Public Email:(Optional)						
		Title: Name:						
		Mailing Address:						
		City: State: Zip: Day Phone:						
	X	Managed by Condominium Managing Agent (see Instructions)  Public Email: (Optional)						
		Management Company: DUI KUUU DIC.						
		Mailing Address: 95 E. LI poo St. #201						
		City: Kinel State: NI Zip: 96753 Day Phone: 808 879 3323 X 7						
5.	a.	Evidence of Fidelity Bond (required) (Between sections 5a and 5b CHECK ONE ONLY; see Question #1 for preprinted expiration date of bond on file with the Commission)						
		No evidence of fidelity bond is attached because bond on file in Question #1 expires AFTER June 30, 2015.  Completed CSI form or certificate of insurance form is attached because bond on file in Question #1 expires ON OR BEFORE June 30, 2015, or evidence of current fidelity bonding is NOT on file with the Commission.						
	b.	b. Bond Exemption (If applying for a bond exemption, select ONE of the following exemptions. A corresponding bond exemption form on page B-2, B-3, or B-4 must be completed as part of the application process). An additional \$50 bond exemption application fee must be added to the preprinted total due on page A-1.						
		<ul> <li>Sole Owner: Where all condominium units are owned by a sole individual, sole corporation, sole partnership, sole Limited Liability Corporation ("LLC"), or sole Limited Liability Partnership ("LLP").</li> <li>20 or Fewer Units: Where the condominium project contains 20 or fewer units.</li> <li>100% Commercial Use: Where all condominium units are 100% commercial use.</li> </ul>						
6.	Ow	ner occupancy: Percentage of residential use units in the project which are owner-occupied: $\underline{57}\%$						
7.		nual operating budget: Did the AOUO board of directors adopt an annual operating budget? 🗵 Yes 🗌 No						
	Pursuant to HRS § 514B-106 (c), within 30 days after adoption of any proposed budget for the association, the board shall make available a copy of the budget to all unit owners and shall notify each unit owner that the owner may request a copy of the budget and to whom that request shall be made.							
8.	Res	serve studies and replacement reserves: (see Instructions)						
	For the current fiscal year, is the AOUO collecting a minimum of fifty percent of the estimated replacement reserves OR funding one hundred percent of the estimated replacement reserves when using a cash flow plan? 💢 Yes 🔲 No							
	If yes, what is the percent funded?: 70 %							
9.	Board of Directors Guides, Real Estate Commission brochures, HRS Chapters 514A and 514B, HAR Chapter 107, copies of the declaration, bylaws, house rules and any amendments? X Yes No							
	lf ye	es, where are the materials kept?: Fello Realty Inc. 95 E. Lipoa St. #201, Kihce, MI						
10.	0. Has the AOUO amended the declaration, bylaws, condominium map or other constituent documents to adopt the provisions of HRS Chapter 514B? ☑ Yes ☐ No							

11.	Ha	s the AOUO utilized medi	ation or arbitration to	resolve condomini	um disput	es within the last	two year	s? ☐ Yes 🕅 l	Vо
	lf y	es, how many times?	Mediation:	Arbitration	n:				
12.	a.	Does the AOUO have a	separate email accou	ınt? ☐ Yes 💆 N	0				
		What is the association	's <b>public</b> email addres	ss? (optional)					_
	b.	Does the AOUO mainta	in an internet website	? ☐ Yes ☒ No					
		What is the public web	site address? (optiona	ıl)					
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## CERTIFICATION OF CONDOMINIUM ASSOCIATION OFFICER, DEVELOPER, 100% SOLE OWNER/OR MANAGING AGENT WITH DELEGATION OF DUTY TO REGISTER For the period July 1, 2015 – June 30, 2017

- 1. I have read and understand the Instructions.
- I certify that this application is complete as required, and is accompanied by the required documents and fees.
- 3. I certify that I am authorized to sign this certification on behalf of this condominium association, that the information provided is true and correct, and that there are no material omissions. (It is unlawful for any AOUO, its officers, board, or agents to file with the Commission any information that is false or contains a material misstatement of fact (HRS §§ 514A-134 and 514B-99.3). Any violation is a misdemeanor.
- 4. I certify that any changes to the required information provided in questions one (1) through five (5) of the registration application information, as required by HRS § 514B-103 (a) (1), shall be reported to the Real Estate Commission, in writing, within 10 days of the date of change. I further certify that the condominium association shall continue to update all other information during the biennial registration period as required by statute and provide updated information as requested by the Real Estate Commission. Also, written notification shall be provided to the Real Estate Commission at least 30 days prior to cancellation, termination, or a material change to the information provided in the evidence of fidelity bond coverage.
- I certify that this condominium association does maintain continuous fidelity bond coverage in compliance with HRS § 514B-143 (a) (3), and that evidence of fidelity bonding or bond exemption shall be filed with the Real Estate Commission throughout this entire registration period. This condominium association acknowledges that its registration shall be automatically terminated for failure to provide the Real Estate Commission with evidence of continuous fidelity bond coverage (if applicable) through June 30, 2017.
- 6. This condominium association has received sufficient notice that if it fails to submit a completed registration application and fails to maintain continuous fidelity bond coverage or an approved fidelity bond exemption, it shall not have standing to maintain any action or proceeding in the courts of this State until it properly registers (HRS § 514B-103 (b)).

Signature of Association Officer, Developer, 100% Sole Owner, or Managing Agent (Original signature or stamp preferred, however facsimile or photocopied signatures are accepted)

PAMELA M. BELLO

Print Name

12/18/15

Date

Date

Print Name of Condominium Association (Managing Agent include CMA Name)

CHECK ONE ONLY:[] President [] Vice-President [] Secretary [] Treasurer [] Developer or Developer's Agent registering for unorganized association [] 100% Sole Owner of Condominium Project [M Managing Agent with Delegation of Duty to Register

Mail or deliver all fees & documents to: Real Estate Branch, AOUO Registration, 335 Merchant St., Rm. 333, Honolulu, HI 96813

If you need assistance: call (808) 586-2643 to speak to a condominium registration clerk.

This material can be made available for individuals with special needs. Please call the Senior Condominium Specialist at (808) 586-2643 to submit your request.